

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Our Principles PAC		FEC IDENTIFICATION NUMBER ▼ C C00603621	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 01 / 22 / 2016</div> </div>	

Full Name of Payee DDC Advocacy		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 805 15th Street, N.W. Suite 300		Amount 44944.64	
City Washington	State DC	Zip Code 20005	Transaction ID : SE.4129
Purpose of Expenditure Direct mail services	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Donald J. Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee DDC Advocacy		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 805 15th Street, N.W. Suite 300		Amount 36048.28	
City Washington	State DC	Zip Code 20005	Transaction ID : SE.4135
Purpose of Expenditure Digital advertising	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Donald J. Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	80992.92
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Jamie Jodoin

[Electronically Filed]

Date

 MM / DD / YYYY
 01 / 22 / 2016

Signature

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Full Name of Payee DDC Advocacy		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 805 15th Street, N.W. Suite 300		Amount 12500.00	
City Washington	State DC	Zip Code 20005	Transaction ID : SE.4143
Purpose of Expenditure Website	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Donald J. Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		218602.28	

Full Name of Payee GCW Media Services		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 1215 K Street Suite 2260		Amount 88388.00	
City Sacramento	State CA	Zip Code 95814	Transaction ID : SE.4125
Purpose of Expenditure Media placement	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Donald J. Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		133332.64	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	100888.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Jamie Jodoin

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Full Name of Payee SPL Strategies, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 107 S. West Street, #461		Amount 27825.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4126
Purpose of Expenditure Media production	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		161157.64	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Name of Federal Candidate		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
Calendar Year-To-Date Per Election for Office Sought			

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	27825.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	209705.92

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Jamie Jodoin

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